

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.2		05-25-01
O.I.P.E. CLASSIFIER		49	6/9/01
FORMALITY REVIEW	MD	574	7/20/01
RESPONSE FORMALITY REVIEW	AM	281	10-02-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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11	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
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100	✓	✓	

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

5/22/01  
 10-04-01  
 RE3P 850